

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000087127

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN GLOBAL INTERNATIONAL UNIVERSITY MIAMI FLORIDA LLC

**Current Principal Place of Business:**

777 DAVIE ROAD, EXTENSION SUITE 300B,  
HOLLYWOOD, FL 33024  
FLORIDA, XX 33314 US

**New Principal Place of Business:**

**Current Mailing Address:**

777 DAVIE ROAD, EXTENSION SUITE 300B,  
HOLLYWOOD, FL 33024  
HOLLYWOOD, FL 33024, FL 33024 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GEORGE, DR MATHEWS  
Address: 201STANFORD DUBAI BANK CORNICHE  
City-St-Zip: ABUDHABI, XX 37365 AE

Title: PR  
Name: HAQUE, DR FAZIL  
Address: 201 STANFORD DUBAI BANK CORNICHE  
City-St-Zip: ABUDHABI, XX 37365 AE

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DR FAZILUL HAQUE

PR

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date